FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

í	For Official USE Only
E	WAN 222006

1. File Number **U**- 9639

3. Name and address of person filing.

P.O. Box, Bidg., Room No., if any

15 St. Jude Lane

Street

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1/1/2005 Through: 12/31/2005

Name IVE-CWA Industrial Division

Street 501 Third Street N.W.

On 3-9-06 518-855-7700

Telephone Number

4. Name, file number, and address of labor organization.

Labor Organization File Number 000-188

P.O. Box, Building and Room Number, if any

city Glenu. He	City Washington	
State N . Y. ZIP Code + 4 / 23 C 2.	State District If Columbia ZIP Code + 4 2001. 279	
5. Position in labor organization. Secretary of IUE-CWA GE Conference Born		
Enter appropriate data below if, during the past fiscal year, you or your spo		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of on represents or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name General Electric Trade Name, if any: 65	Step 3 gnewares	
P.O. Box, Bldg., Room No., if any		
	7.b. Amount.	
City Fair Field	\$51.01	
State Co-44 06431		
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information		

submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

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1. File Number U -	2. Fiscal Year Covered From:	
	1 / 1 / 2005 Through: 12 / 31 / 2005	
Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Vincent J Vinco .	Name IUE-CWA Industrial Division	
	Labor Organization File Number 000 - 188	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 15 St. Jude Lane	Street 501 Third Street N.W.	
city Glenuille	State District If Columbia ZIP Code + 4 20001. 279;	
State N.Y. ZIP Code + 4 /2302	State District If Columbia ZIP Code + 4 20001. 279;	
5. Position in labor organization. Secretary of IUE-CWA GE Conference Board		
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name General Electric	Step 3 Grievances	
Trade Name, if any:	Dinner	

Signature

ZIP Code +4 06431

7.b. Amount.

13. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

P.O. Box, Bldg., Room No., if any

Fair field

Street 3135 Eastern Turngike

On <u>3-9-06</u> <u>518-815-7700</u>

Date Telephone Number

\$57.73

For Official Use Only

P.O. Box, Bidg., Room No., if any

City

State

Colony. le

N.Y.

15 St. Jude Lane

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1. File Number U -	2. Fiscal Year Covered From:
	1/1/2005 Through: 12/31/2005
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Vincent J Victo -	Name INE-CUA Industrial Division

City Washingtons
State District It (clumbic ZIP Code + 4 20001-2747 5. Position in labor organization. IUE-CWA GE Conference Board

Labor Organization File Number 000-188

Street 501 Third Street N.W.

P.O. Box, Building and Room Number, if any

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

ZIP Code +4 /2302

A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of ion represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Electric	Step 3 grievances
Trade Name, if any:	Outin
P.O. Box, Bldg., Room No., if any	7.b. Amount,
Street 3/35 Eastern Turng, ke	\$ 115.42
city Fair Field	
State Co. Y. ZIP Code + 4 06431	

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed		518 · 885 ~ 7700

Telephone Number

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1. File Number U -	2. Fiscal Year Covered From:	
	1 / 1 / 2005 Through: 12 / 31 / 2005	
3. Name and address of person filing.	Name, file number, and address of labor organization.	
Name Vincent J Vines -	Name IVE-CWA Industrial Division	
	Labor Organization File Number Oco 188	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 15 St. Jude Lane	Street 501 Third Street N.W.	
city Glenu. lle	State District If (clumbia ZIP Code + 4 2000). 274	
State N. Y. ZIP Code + 4 / 2302	State District If (clumbia ZIP Code + 4 20001. 274	
5. Position in labor organization. Secretary of IUE-CWA GE Conference Ban		
Enter appropriate data below If, during the past fiscal year, you or your spo		
Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of ion represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name General Electric	Step 3 greener	
Trade Name, if any:	Outing	
P.O. Box, Bldg., Room No., if any	- Corney	
Street 2:2 - to /	7.b. Amount.	
Street 3135 Eastern Turng, ke	\$ 151.41	
City For Field	J 12 1 · 71	

Signature

ZIP Code +4 0643/

A-1		
15. Signature and verification. The undersigned declares upder populty of Deriver and other analysis to the state of the s		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information		
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the		
in any accompanying documents), has been examined by the signatory and is, to the best of the		
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
	men on pendince at the motion	citoria.)
Signed ///	0- 7-9-06	
		518-885-7700
		<u> </u>
	Date	Tolophone Number
		Telephone Number

Fair field

For Official Use Only

1. File Number U -

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FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

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2. Fiscal Year Covered From:

	1/1/2005 Through: 12/31/2005	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Vincent J Vincos.	Name IUE-CWA Industrial Division	
	Labor Organization File Number 000 - 188	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 15 St. Jude Lane	Street 501 Third Street N.W.	
City Glenuille	State District If Columbia ZIP Code + 4 20001. 274	
State N.Y. ZIP Code + 4 /2302	State District If (clumbia ZIP Code + 4 20001. 279	
5. Position in labor organization.	IUE-CWA GE Conference Board	
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization	derived income or other economic benefit of property or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name General Elections	Step 3 Dinner	
Trade Name, if any:	Grevances	
P.O. Box, Bldg., Room No., if any		
Street 3135 Enoter Turn, ke	7.b. Amount.	
City Fair Field		
State ZIP Code + 4 06431		

Signature 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

On 3-9-06 518-885-7700
Date Talanhara William

Telephone Number

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

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3. Name and address of person filing.

P.O. Box, Bldg., Room No., if any

Yirant I Vista

15 St. Jude Lane

1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2005 Through: 12 / 3, / 2005

Name INE-CWA Industrial Division

Street 501 Third Street N.W.

On 3-9-06 518-855-7200

Date Telephone Number

4. Name, file number, and address of labor organization.

Labor Organization File Number 000 - 188

P.O. Box, Building and Room Number, if any

city Glenu. le	City Washington		
State N. Y. ZIP Code + 4 /2302	State District It (clumbia ZIP Code + 4 20001. 274)		
5. Position in labor organization.	IUE-CWA GE Conference Board		
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name General Electric	Step 3 grievances		
Trade Name, if any:	Dinnen		
P.O. Box, Bldg., Room No., if any	7.b. Amount.		
Street 3/35 Eastern Turng, ke	88628		
city fair field			
State Co. r. ZIP Code + 4 06431			
Signature			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information			

submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

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FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

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1. File Number U-	2. Fiscal Year Covered From:
	1/1/2005 Through: 12/31/2005
Name and address of person filing.	Name, file number, and address of labor organization.
Name Vincent J Vines -	Name IVE-CWA Industrial Division
	Labor Organization File Number 000 -188
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 15 St. Jude Lane	Street 501 Third Street N.W.
city Glenu. lle	City Washington
State N. Y. ZIP Code + 4 / 2362	State District If (clumbia ZIP Code +4 20001. 274
5. Position in labor organization.	IUE-CWA GE Conference Band
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):	
Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Elections	Step 3 grecane
Trade Name, if any:	dans
P.O. Box, Bldg., Room No., if any	
Street 7:4 - F	7.b. Amount.
Street 3/35 Eastern Turny, ke	\$ 61.00
City Fair Field	.7
State ZIP Code + 4 06431	

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

On 3-9-06 518-855-7200

Date Telephone Number

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1. File Number U -

Ε

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2. Fiscal Year Covered From:

	1/1/2005 Through: 12/31/2005	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Vincent J Vines -	Name IVE-CWA Industrial Division	
	Labor Organization File Number OCO - 188	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 15 St. Jude Lane	Street 501 Third Street N.W.	
city Glenuille	State District Of Columbia ZIP Code + 4 20001. 274	
State N. Y. ZIP Code + 4 / 23 C 2	State District Of Columbia ZIP Code + 4 20001. 274	
5. Position in labor organization. Secretary of IUE-CWA GE Conference Board		
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests		
(except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name General Electric	Step 3 grievancs	
Trade Name, if any:	Dinne	
P.O. Box, Bldg., Room No., if any		
Street 3135 Eastern Turny, ke	7.b. Amount.	
city fair field	\$//5.72	
State ZIP Code + 4 06431		

Signature 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

On 3-9-06 518.855-7700

Telephone Number

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For Official Use Only	
	READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.
E	
1. File Number U-	2 Fiscal Year Covered From

	1 / 1 / 2005 Through: 12 / 31 / 2005
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name Vincent J Vinco -	Name IVE-CLUA Industrial Division
	Labor Organization File Number 000 - 188
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 15 St. Jude Lane	Street 501 Third Street N.W.
City Glenulle	State District Of Columbia ZIP Code + 4 20001. 2747
State N . Y. ZIP Code + 4 /23/02	State District If Columbia ZIP Code + 4 20001. 2797
5. Position in labor organization. Secretary of IUE-CWA GE Conference Board	
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	

6. Name and address of Employer (including trade name, if any). 7.a. Nature of Interest, Transaction, or Income. Busines Mt. Name General Electric Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount. Street 3135 Eister Turny, ke City Fair Field ZIP Code + 4 06431

Signature

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submitted in this report /including the information contained in one recommendation
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On 3-9-06 518-855-7200

Date Telephone Number

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1. File Number U -	2. Fiscal Year Covered From:
	1/1/2005 Through: 12/31/2005
Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Vincent J Vico -	Name IVE-CWA Industrial Division
	Labor Organization File Number OCO - 188
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 15 St. Jude Lane	Street 501 Third Street N.W.
city Glenu. lle	State District If Columbia ZIP Code + 4 20001-27
State N. Y. ZIP Code + 4 / 23 G.2.	State District If (cloubs ZIP Code + 4 20001. 27
5. Position in labor organization.	IUE-CWA GE Conference Board
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):	
Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name GENERAL ElEctric	Burners Mt.
Trade Name, if any:	Dance
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street 3/35 Eastern Turny, ke	\$60,00
City Fair Field	
State ZIP Code + 4 ()(343)	

Signature 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

On 3-9-06 518-855-7200 Telephone Number

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	1/1/2005 Through: 12/31/2005
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Vincent J Vinco .	Name IVE-CLUA Industrial Division
	Labor Organization File Number Oco - 188
P.O. Box, Bidg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 15 St. Jude Lane	Street 501 Third Street N.W.
city Glenu. He	State District Of Columbia ZIP Code + 4 20001-27
State // . Y. ZIP Code + 4 / 23 C 2	State District Of Columbia ZIP Code + 4 20001. 27
5. Position in labor organization. Secretary of IUE-CWA GE Conference Board	
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Electric	Cincinnati Shop
Trade Name, if any:	Status Meeting
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street 3/35 Eastern Turny, ke	7.5. AMOUNT.
city Fair Field	20.0
State ZIP Code + 4 06431	
Signature	
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On 3-9-06 5/8-885-7200
Date Telephone Number

Telephone Number

For Official Use Only

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1. File Number U-	2. Fiscal Year Covered From:
	1/1/2005 Through: 12/31/2005
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Vincent J Vincos -	Name IVE-CWA Industrial Division
	Labor Organization File Number
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 15 St. Jude Lane	Street 501 Third Street N.W.
City Glenu. lle	State District Of Columbia ZIP Code + 4 2001. 274
State N. Y. ZIP Code + 4 / 2302	State District Of Columbia ZIP Code + 4 2001. 274
5. Position in labor organization.	IUE-CWA GE Conference Board
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name GENERAL Electric	Step 3 grievances
Trade Name, if any:	Step S grievances
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street 3/35 Easter Turny, ke	860.00
city fair field	XX C
State ZIP Code + 4 06431	

Signature 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

On 3-9-06 518-885-7700

Date Telephone Number

Telephone Number

undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed